

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 359532 (9)

1. Corporation Name
CONTINENTAL FIDELITY CORPORATION

Principal Place of Business 777 ARTHUR GODFREY ROAD 4TH FL MIAMI BEACH FL 33140	Mailing Address 777 ARTHUR GODFREY ROAD 4TH FL MIAMI BEACH FL 33140-3447
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2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 02/12/1970		3a. Date of Last Report 06/04/1996	
Sulte, Apt. #, etc. 22		Sulte, Apt. #, etc. 27		4. FEI Number 59-2375337		Applied For Not Applicable	
City & State 23		City & State 28		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
Zip 24		Zip 29		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Country 25		Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent BALOGH, ROBERT 777 ARTHUR GODFREY RD 4TH FL MIAMI FL 33140				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	BALOGH, ROBERT			1.2 NAME			
STREET ADDRESS	ONE GROVE ISLE			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	ERDHEIM, JOAN BALOGH			2.2 NAME			
STREET ADDRESS	31 EAST 72ND STREET			2.3 STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY			2.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	BALOGH, DAVID R.			3.2 NAME			
STREET ADDRESS	5255 COLLINS AVENUE			3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI BEACH FL			3.4 CITY-ST-ZIP			
TITLE	VD	☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	TOBIN, JACK B.			4.2 NAME			
STREET ADDRESS	3351 N. 38TH PLACE			4.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			4.4 CITY-ST-ZIP			
TITLE	ST	☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME	MARK R. RUBIN			5.2 NAME			
STREET ADDRESS	777 ARTHUR GODFREY RD., 4TH FL			5.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI BEACH FL			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied on this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or a receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

Robert B. Balogh, President 3/31/97 (305)532-7775

CR2E034 (9/96)